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Naval Service Medical News (NSMN) (96-11)
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HEADLINE: Navy SG Reenlists Air Force's Top Health Care Enlisted
BUMED Washington (NSMN) -- The Air Force's Chief of Medical
Enlisted Issues, Command Master Sergeant Laura E. Dumez, had an
odd selection for who and where she reenlisted recently: Navy
Surgeon General VADM Harold M. Koenig, MC, officiated at the
ceremony, which was held at Naval Hospital Corps School Great
Lakes, IL.

Dumez's father, Roland R. Bonenfant, was a chief in the
Navy's hospital corps during World War II and had seen service
with the Marines and lots of sea time. "He would be proud of the
Navy Surgeon General reenlisting me while I serve as the senior
medical/dental representative for the Air Force Medical Service,"
said Dumez.

"It's an honor to have the senior enlisted of Air Force
medicine reenlist at our Hospital Corpsman 'A' School," said Navy
medicine's top enlisted, Force Master Chief HMCM(SS) Michael L.
Stewart. Stewart presented Dumez with a U.S. flag that had flown
over the "A" School. "It's important that our service people
around the globe be ready, willing and able to defend that flag,"
he said. "Ceremonies such as this one demonstrate the ability of
the services to work together in support of our country."

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HEADLINE: Dental Technician Selected As COMNAVFORJAPAN SOY
USNDC Yokosuka, Japan (NSMN) -- DT1(AW) Beverly Yvone

Waters, U.S. Naval Dental Center (USNDC) Yokosuka's Sailor of the Year, was recently selected as Commander Naval Forces Japan Shore Sailor of the Year for 1996.

"There were so many thoughts going through my head, I was speechless. I knew this award was an accumulation of a lot of hard work by the entire Yokosuka dental staff," said Waters. "I am thrilled at being given this recognition because it means my command will also be recognized."

Waters wished her recruiter, PN1 McCollum, could have been here to see this. "Twelve years ago in Huntington Park, California, he gave me a positive attitude toward the Navy and I've been able to build on this through setting and achieving career goals."

As Leading Petty Officer, Headquarters Clinic Yokosuka, Waters created flexible assignment schedules to place her personnel in areas of greatest need. This directly improved productivity and achieved dramatic improvement in access to dental care for family members, a significant quality of life issue in Yokosuka.

"Petty officer Waters is a top-notch petty officer," said DTCS(SW) Ken Jones, USNDC's Command Senior Chief. "She is the type of bright, young leader we need in our CPO mess."

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HEADLINE: Corpsman Selected for Honors by Naval Helicopter Group
NAVHOSP Oak Harbor, WA (NSMN) -- When HM2 Shannon Murray, a Search and Rescue Corpsman assigned to Naval Hospital Oak Harbor, recently returned from a six-month stint "down on the ice" in Antarctica, she found a special honor awaiting her. The Naval Helicopter Association selected her as the Navywide "Aircrewman of the Year."

Murray was one of five regional winners who competed for this top honor. She will be the guest of honor at the association's 11 April VIP luncheon and evening awards banquet in San Diego.

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HEADLINE: Congratulations to New Navy Medical Two Stars
SECNAV Washington (NSMN) -- ALNAV 008/96 released 19 March, announced that the Secretary of Defense, acting for the President of the United States, had approved the report of the selection board, which recommended the following officers in the "senior health care executive competitive categories on the active-duty list of the Navy for promotion to the permanent grade of rear admiral":

RADM Noel K. Dysart Jr., MC, Director, Medical Resources, Plans And Policy Division, N931, OPNAV; and

RADM Dennis I. Wright, MC, Medical Officer to the Marine Corps.

Congratulations Admirals Dysart and Wright on your selection for promotion.

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HEADLINE: Zachary Fisher Receives ACHE Honorary Fellowship

ACHE Chicago (NSMN) -- On 10 March, Zachary Fisher was recognized as the 1996 American College of Healthcare Executives Honorary Fellow at the ACHE's Convocation Ceremony.

Fisher is an avid philanthropist involved in many projects, including the Fisher House Program and the Zachary and Elizabeth Fisher Medical Foundation.

Honorary Fellowship is a special category of ACHE membership. It is awarded to distinguished leaders who have had a beneficial influence on the profession of health services management and/or some aspect of public health, but are not eligible to join the College.

Fisher's compassion for military personnel and their families during times of need materialized with the founding of the Zachary and Elizabeth Fisher Armed Services Foundation, which makes contributions to families who have lost a loved one in military accidents. The Fishers also launched the Fisher House Program in 1990, which has donated more than \$15 million to the construction of comfort homes for families of hospitalized military personnel, and the Zachary and Elizabeth Fisher Medical Foundation, which is dedicated to working toward a cure for Alzheimer's disease.

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HEADLINE: Patient 'Seen' in Antarctica by San Diego Specialist
NMC San Diego (NSMN) -- Space-age technology and Navy medicine have combined to produce an innovative diagnostic technique. A far cry from the traditional hands-on approach to the practice of medicine, telemedicine allows the physician to examine, diagnose and prescribe for a patient without actually seeing the patient. The doctor needn't be in the same room with the patient, or even in the same country.

For example: Last week, a service member assigned to Operation Deep Freeze, McMurdo Sound, Antarctica, went to Sick Call complaining of blood in his urine. His medical officer performed an X-ray exam called Intravenous Pyelography, IVP for short. The X-ray images were read by a urologist at Naval Medical Center San Diego, who diagnosed the problem as a 4mm kidney stone lodged in the patient's ureter. A medevac was activated immediately.

The patient, who had remained in Sick Bay, passed the stone spontaneously within 24 hours. A second IVP was performed, again read by the specialist in San Diego, which showed the stone was gone, and the medevac was canceled.

Telemedicine benefited everyone concerned with this story -- first and foremost, the patient. Had he not passed the stone, he would have been medevac'd to where treatment would have begun within hours of diagnosis.

Telemedicine benefited the Navy and the taxpayer by eliminating the cost of a medevac aircraft and crew being deployed to Antarctica, as well as the cost of reassigning and transporting a service member to Operation Deep Freeze to replace the patient.

Story by Ms. Pat Kelly, Naval Medical Center San Diego

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HEADLINE: GW Medical Sets Health Care Precedent

USS GEORGE WASHINGTON (NSMN) -- Every month, the Medical Department aboard USS GEORGE WASHINGTON (CVN 73) is required to submit a monthly report to COMNAVAIRLANT. It includes information reporting on how many prescriptions were dispensed, lab results, how many patients were seen and which medical procedures were performed. Until recently, GEORGE WASHINGTON compiled that information the "old-fashioned way" -- the medical staff poured over green log books scattered throughout the department's work stations and then tallied up the numbers. The process was tedious and time consuming, taking eight to 10 days.

Last October, that all changed. The ship's medical department was outfitted with a computer system called the Composite Health Care System, a first for an afloat command. In five months, it has revolutionized shipboard medical care. The same monthly report that once took days to compile now takes no more than a morning.

"The system is our own internal patient management system," said LT David Collins, GW's medical administrative officer. "We can now run everything from the pharmacy and lab work to physical exams and inpatient work in the ward."

Besides the tremendous benefit gained in maintaining most patient administrative information electronically, perhaps the greatest capability the new system has brought to the ship is the ability to communicate almost instantaneously with specialists at shore hospitals such as Naval Medical Center Portsmouth, VA, and National Naval Medical Center Bethesda, MD.

For the healthy Sailor, the new system also has numerous advantages. Every GW and air wing Sailor has their own medical record in the new system, with basic information such as allergies, prescriptions and any recent medical history. If anything should happen, the electronic record becomes an effective and time-saving tool to pass on information. Story by JO2 Thomas Gelsanliter, USS GEORGE WASHINGTON

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HEADLINE: Jacksonville Pharmacy Tops In Customer Service

NAVHOSP Jacksonville, FL (NSMN) -- The newly renovated Outpatient Pharmacy at Naval Hospital Jacksonville opened for business recently with rave reviews from its customers.

The new pharmacy now has 12 customer service windows instead of the old single pick up counter. LTjg Chad Chamberlain, a pharmacist at the hospital who was responsible for a great deal of the renovation planning, said the idea for the change started with the head of the Pharmacy Department, CDR Charlie Hostettler, who was involved with a similar customer service improvement at a previous duty station. Chamberlain said, "Now that I see how well it works and the speed that patients are served, I'm a believer. On our first day operating with this new procedure, we had a typical day as far as number of prescriptions filled, which for us is about 3,000 scripts. ...

"At our peak demand period the longest total time for service, which included waiting in line, turning in a new

prescription, having it filled and patient education counseling was a total of 18 minutes."

Mr. Frank Lawson, an Air Force retiree, was one of the patients who had a prescription filled during the normal morning rush on opening day. Lawson said, "This is a big improvement from the way it used to be. This is really, really fast. I appreciate what they've done for us." Lawson moved to the Jacksonville area in 1988 and said he's watched a number of customer service improvements in the pharmacy, starting with the Call-In Refill service that started in 1989. He pointed out that the Drive-Thru Refill Pick Up location in the hospital parking lot solved long waits for refills and now this new renovation has made getting new prescriptions a quick evolution.

Story by Mr. Bob Hines, Naval Hospital Jacksonville

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HEADLINE: TRICARE/CHAMPUS to Cover Cancer Treatment Trials

OCHAMPUS Aurora, CO (NSMN) -- The TRICARE/CHAMPUS breast cancer demonstration project has been expanded to include clinical trials sponsored by the National Institutes of Health's National Cancer Institute (NCI) for other cancers.

The expansion of the demonstration became effective 1 January 1996.

TRICARE/CHAMPUS-eligible cancer patients who meet clinical criteria for participation in NCI-sponsored studies will have better access to promising cancer therapies. The participation of the Department of Defense (DOD) in NCI-sponsored clinical trials for cancer will further research efforts and help determine the safety and efficacy of new ways of treating cancer.

The original demonstration, which began in 1994, allowed CHAMPUS to reimburse the costs for eligible patients who requested treatment for breast cancer under NCI-sponsored Phase III clinical trials.

Participation in the expanded demonstration now includes Phase II and Phase III NCI-sponsored clinical trials and is extended to other cancers. TRICARE/CHAMPUS patients who wish to participate in an NCI-sponsored clinical trial must have advance approval for the treatment from the TRICARE/CHAMPUS contractor, currently Palmetto Government Benefits Administrators (PGBA).

A TRICARE/CHAMPUS-eligible patient who has cancer will be initially evaluated by his or her physician. After discussing the various treatment options with the patient, if he or she agrees to consider a clinical trial, the physician will determine which clinical trials and participating medical institutions are available. The physician will then arrange for evaluation of the patient at the chosen center. Providers seeking program information or seeking authorization for treatment on an NCI-sponsored trial should call Palmetto GBA at 1 800 779-3060.

Upon identifying an appropriate NCI-sponsored trial and receiving authorization for treatment from the contractor, the physician will then arrange for an evaluation of the patient at the chosen center. Physicians at the center involved in the NCI-sponsored clinical trial will make the actual determination of eligibility, based on the clinical criteria for their study.

Participating institutions include NCI's network of cancer centers, university and community hospitals and practices, and military hospitals.

Normal TRICARE/CHAMPUS cost-shares and deductibles will apply for demonstration participants.

Story provided by the Office of Civilian Health and Medical Program of the Uniformed Services

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HEADLINE: Optometry Externship Leads to a Navy Career Choice

NMCL New Orleans (NSMN) -- University of Houston optometry extern Jacqueline King, encouraged by her positive experience at Naval Medical Clinic New Orleans, has decided to pursue a commission in the Navy Medical Service Corps. As she approached the conclusion of her semester-long externship under LT Chris Whitney, the clinic's optometrist, King indicated a desire to apply her education and training through a career in Navy medicine that "offers outstanding opportunities for professional development." As an externship site for the University of Houston, Naval Medical Clinic New Orleans serves to mentor and train fourth year optometry students who receive diverse clinical training in a multidisciplinary health care setting.

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HEADLINE: Navy Nurses Support College of Nursing Accreditation

USNH Guam (NSMN) -- Navy nurses stationed at U.S. Naval Hospital Guam are proud to have recently contributed to the historic National League of Nursing accreditation recommendation obtained by the College of Nursing at the University of Guam. The surveyors are also recommending the accreditation be for the maximum five years; a monumental success for an initial accreditation. The College of Nursing is now the only professionally accredited program at the university. Students from the college are continually welcomed to U.S. Naval Hospital Guam to obtain clinical experiences in areas such as obstetrics nursing and leadership training from Navy nurses who become their instructors and role models. Library resources and class presentations are also offered to the students and faculty to share the latest nursing information with them. The surveyors commented often on the incredible "family support" the College of Nursing receives from the Navy and the community at large. This tremendous support is considered a significant factor in the success of the accreditation survey. With accreditation, students from the university will be eligible to apply for Navy programs and commissions as Navy Nurse Corps officers.

Story by CDR Christine M. Bruzek-Kohler, NC

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HEADLINE: 'Children Act Fast ... So Do Poisons'

NNMC Bethesda, MD (NSMN) -- Each year, thousands of children, especially between the ages of 2 and 6, are accidentally poisoned by things they find around the house. National Poison Prevention Week, 17-23 March, is a time to focus on preventing a tragedy, but those with children should be

vigilant all year.

The theme for this year's Poison Prevention Week is, "Keep safe. Keep it up and away. Children act fast ... so do poisons."

As a general rule, any medication that has been stored for longer than a year may have degraded and become useless or dangerous. This is especially true for those medications stored in the kitchen and bathroom -- the worst places for storage. Take the time to clean out old medications and eliminate that danger.

Despite your best efforts, children are still curious and could still ingest poison. If this occurs, remain calm and call the poison control center. Bring the container to the phone and be prepared to tell:

- the exact name of the product;
- the amount taken and how introduced (swallowed, inhaled, absorbed through skin contact or splashed in the eyes);
- the victim's age, weight, gender and existing health conditions or problems;
- when the poisoning occurred;
- any first aid given; and
- if the victim has vomited.

The Maryland Poison Center advises not giving ipecac if the victim is under six months, drowsy, sleepy or unconscious, has a history of seizures or is burned around the mouth.

For more information, contact your local pharmacy.
Story by ENS Bridgette Anderson, National Naval Medical Center
Bethesda, Pharmacy Department

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HEADLINE: Celebrating TQL Successes at Halyburton Naval Hospital
NAVHOSP Cherry Point, NC (NSMN) -- At Halyburton Naval Hospital, Marine Corps Air Station Cherry Point, special emphasis is focused on Total Quality Leadership and rewarding teams and team members for process improvement efforts. In a special "Celebrating TQL Successes" ceremony conducted late last month by the hospital's commanding officer, CAPT Vernon M. Peters, MSC, team leaders and members of the "Managing Blood and Body Fluids" and the "Medical Waste and Disposal" Process Action Teams (PATs) were honored for their accomplishments in implementing improvements to the processes associated with these functions.

The teams were praised and command personnel were given the opportunity to examine exhibits depicting tools and methods used to accomplish improvement of their processes. After team members were presented certificates for their team involvement, team leaders participated in the cutting of a cake decorated with the hospital's crest. Ceremonies of this type will be conducted on a regular basis as new successes are realized.
Story by Ms. Alice Eddinger, TQL Coordinator, Naval Hospital
Cherry Point

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HEADLINE: Armed Forces Service Medal Criteria Established
BUPERS Washington (NSMN) -- NAVADMIN 057/96 announced the

establishment of the Armed Forces Service Medal (AFSM) and the policy Secretary of Defense Perry has approved for awarding the AFSM to service members.

In general, the AFSM may be awarded to members of the U.S. armed forces who, after June 1, 1992:

- Participate, or have participated, as members of U.S. military units, in a U.S. military operation considered a significant activity; and

- Encounter no foreign armed opposition or imminent threat of hostile action.

The NAVADMIN also contains information on other areas, such as qualifying operations, definitions, limitations on awarding medals, approval and designation of area of eligibility, as well as:

- Awarding the AFSM to U.S. military participants in operations relating to the former Republic of Yugoslavia from June 1, 1992, through a future date to be determined. Operations include Provide Promise, Joint Endeavor, Able Sentry, Deny Flight, Maritime Monitor and Sharp Guard within the total land area and air space of the former Republic of Yugoslavia, Aviano, Ancona, Brindisi, Italy, Hungary and the waters and air space above the portion of the Adriatic Sea lying north of forty degrees north latitude.

- Eligibility criteria for service members who are not bona fide members of a unit participating for one or more days in the operation within the designated area of eligibility, but have served in some capacity in support of an operation in the area of eligibility.

- Listing of ships and units which supported NATO operations in the Adriatic between July 1, 1992 and Nov. 30, 1995, eligible for the AFSM.

In the next couple of weeks, the Bureau of Naval Personnel (BUPERS) is planning to have NAVADMIN 057/96 available on the BUPERS Home Page (under NAVADMINs) and the BUPERS Access bulletin board.

Story by LT Kelly Watson, Bureau of Naval Personnel

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HEADLINE: TRICARE Questions and Answers

BUMED Washington (NSMN) -- As TRICARE comes on line across the country, beginning last year and expected to be available throughout the United States by May 1997, questions about this Department of Defense managed health care program come up. Each week, the Naval Service Medical News will include "TRICARE Questions and Answers" to answer them.

Q: If I select a civilian primary care manager, can I still use a military medical treatment facility or PRIMUS/NAVCARE clinic for routine health care services?

A: Enrollees choosing a civilian primary care manager (PCM) must obtain a referral in order to use the military medical treatment facility (MTF) or a PRIMUS/NAVCARE clinic. Enrollees choosing an MTF as their primary care manager must obtain a

referral to use a NAVCARE/PRIMUS clinic or civilian provider, unless the clinics are your PCM. Enrollees who choose a NAVCARE/PRIMUS clinic as their primary care manager/site must obtain a referral to use an MTF or civilian provider.

No referral will be necessary for emergencies or for pharmacy services obtained at an MTF or a TRICARE Prime network pharmacy.

Q: What if I don't like my assigned PCM. How can I change my PCM?

A: You can change your PCM at any time by completing a Change Request Form which is available at your local TRICARE Service Center.

If you have questions about TRICARE you'd like answered in this column, please contact the editor (see last paragraph of this message on ways to do so).

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HEADLINE: HEALTHWATCH: If You Drink Alcohol, Do It In Moderation
BUPERS Washington (NSMN) -- Alcoholic beverages such as beer, wine and whiskey supply calories, but no nutritional value. Heavy drinkers and alcoholics develop conditions such as malnutrition, cirrhosis of the liver, pancreatitis and increase their risk for high blood pressure and stroke. This is the result of impaired digestion and absorption of nutrients, as well as damage to liver cells by the toxicity of alcohol. Consumption of alcohol by women during pregnancy may result in birth defects and other complications.

So what is moderate alcohol use? Moderation may be defined as no more than one drink per day for women and no more than two drinks per day for men. The difference is because the enzyme that helps metabolize alcohol in the body is less active in women.

What counts as a drink?

- 12 ounces of regular beer (150 calories);
- 4 ounces of wine (100 calories); or
- 1.5 ounces of 80 proof distilled spirits (100 calories).

Current research suggests moderate alcohol use is somewhat protective against heart disease in some individuals (but it is not recommended that you begin using alcohol to prevent heart disease). Keep in mind that alcohol use is not without its risks. The incidence of accidents, violence and suicides tends to increase with alcohol use.

Since alcohol is a source of "empty" calories, people wishing to lose or maintain their weight should reduce their intake of alcohol. It is easy to see how consuming a six-pack of beer in an evening affects one's overall calorie intake (6 x 150 = 900 calories). Even though alcohol is fat-free, excess calories in any form are converted into fat and stored by the body as such. In summary, if you drink alcohol beverages, do so in moderation and when consumption does not put you or others at

risk.

Story by LT Leslie Cox, BUPERS Nutrition Programs Officer

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